07-02-02

Express Mail Mailing Label No. EL953132277US Application Serial Number 09/621,268 July 21, 2000 Filing Date First Named Inventor Gillies 1646 Group Art Unit TRANSMITTAL S. Prasad Examiner Name FORM Attorney Docket No. LEX-007 Not applicable BATCH NO. (after allowance) Not applicable Patent No. Not applicable Issue Date ENCLOSURES (check all that apply) Fee Transmittal Form Copy of Notice to File Missing Notice of Appeal to Board Parts of Application (PTO-1553) of Patent Appeals and Interferences Check Attached Appeal Brief (in triplicate) Copy of Fee Formal Drawing(s) Transmittal Form \boxtimes Request For Continued Amendment/Response Status Inquiry Examination (RCE) Transmittal Preliminary \boxtimes Return Receipt Postcard After Final Affidavits/declaration(s) Power of Attorney (Revocation of Prior Powers) Certificate of First Class Mailing Letter to Official under 37 C.F.R. 1.8 Draftsperson including Drawings [Total Sheets ____ Terminal Disclaimer Certificate of Facsimile Transmission under 37 C.F.R. 1.8 \boxtimes Petition for Extension of П **Executed Declaration and Power** Additional Enclosure(s) Time of Attorney for Utility or Design (please identify below) Patent Application Information Disclosure Small Entity Statement Statement Form PTO-1449 Copies of IDS CD(s) for large table or computer Citations program Certified Copy of Priority Amendment After Allowance Document(s) Request for Certificate of Sequence Listing submission Correction Paper Copy/CD Certificate of Correction (in Computer Readable Copy duplicate) ☐ Statement verifying identity of above SIGNATURE BLOCK CORRESPONDENCE ADDRESS Respectfully submitted, Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower Date: July 1, 2002 125 High Street Reg. No. 41,640 Michael H. Brodowski

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Attorney for the Applicants

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	Complete if Known	
Application Serial Number	09/621,268	0.5
Filing Date	July 21, 2000	± ,
First Named Inventor	Gillies	유 고
Group Art Unit	1646	2
Examiner Name	S. Prasad	FE1
Attorney Docket No.	LEX-007	7.

METHOD OF PAYMENT			FEE CALCULATION (continued)			8 8
1. Payment Enclosed:			3. ADDITIONAL FEES			250
_	Ď Check ☐ Money Order ☐ Other	•	Large	Small		
	•		Entity	Entity		
	The Commissioner is hereby authorized to		Fee	Fee	Fee Description	Fee Paid
	or charge any fee indicated below for this	submission	(\$)	(\$)		
	to Deposit Account No. 20-0531.					
	Required Fees (copy of this sheet e		130	65	Surcharge - late filing fee or oath	
	Additional fee required under 37 C	FR 1.16 and	50	25	Surcharge - late provisional filing fee	1
	1.17.				or cover sheet	
	Overpayment Credit.		130	130	Non-English specification	
3. 🗌	Applicant claims small entity status.		2,520	2,520	Request for ex parte reexamination	
	FEE CALCULATION		110	55	Extension for reply within first month	
1. FILIN	IG FEE		400	200	Extension for reply within second month	
Large l	Entity		920	460	Extension for reply within third month	920.00
Fee (\$		Fee Paid	1440	720	Extension for reply within fourth	920.00
ree (s) rec Description	ree i aiu	1440	120	month	1
			1960	980	Extension for reply within fifth month	
740	Utility filing fee		320	160	Notice of Appeal	
330	Design filing fee		320	160	Filing a brief in support of an appeal	
160	Provisional filing fee		280	140	Request for oral hearing	
			130	130	Petitions to the Commissioner	
	Nombre Nombre Date	A	180	180	Submission of Information Disclosure	
	Number Number Rate Filed Extra	Amount	740	370	Statement Filing a submission after final	
	riieu Extra		/40	370	rejection (37 CFR 1.129(a))	
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Total Clair	-20 = x \$ 18.00	=	740	370	For each additional invention to be examined (37 CFR 1.129(b))	
Independe	nt		100	100	Certificate of Correction for	
Claims	-3 = x \$ 84.00	=	100	100	applicant's error	
	·		Other fee (Sp	ecify)		
☐ Multipl	e Dependent Claim(s), if any \$280.00		Other fee (Sp	ecify)		
	mom	•				
	TOTAL					
	SMALL ENTITY DISCOUNT SUBTOTAL (1) (\$)	0.00				
2 AME	NDMENT CĽAIM FEES	0.00				
	Claims Highest No. Present Rate	Fee Paid			SUBTOTAL (3) (\$)	920.00
Res	maining Previously Extra				565761112(5)	220.00
Afte	Amend. Paid For					
m 5	c c	0.00	ļ		CUDTOTAL (1)	00.00
Total 5		1111			SUBTOTAL (2)	00.00
Indep. 5 ☐ First 1	-6 = 0 x \$ 84.0 Presentation of Multiple Dep. + \$280.0				SUBTOTAL (2) SUBTOTAL (3)	920.00
Claim		0.00			00 D. 011 E (5)	220.00
	TOTAL:	(\$)0.00				
	SMALL ENTITY DISCOUNT:	(\$)0.00	}			
i	SUBTOTAL (2)	(\$)0.00			TOTAL (\$)	920.00
CORRESPONDENCE ADDRESS			SIGNATURE BLOCK			
Direct all correspondence to:					Respectfully submitted,	
Patent Administrator					71 - 101 1	/,
Testa, Hurwitz & Thibeault, LLP			Date: July 1,		/m/H/swelowel	<u>u</u>
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